



Family Cost Participation Statement

Account # 123456789 Statement Date 09/27/2006

Calculated Monthly Fee Effective 06/22/2006 \$66.60

Maximum Monthly Fee Amount Due This Month \$62.50

Nice Family
123 Main
City, MO 12345

FAMILY NOTE: The maximum Monthly Fee Amount paid by a family in a month is the lesser of the Calculated Monthly Fee and the Cost of Services Received During Month. Other adjustments (over or underpayment in a previous month) to the total amount due will also be reflected in the adjustment column. This billing statement reflects services and family Monthly Fee status that occurred two months prior to this billing date.

First Steps Participants	Service Coordinator	Phone
Nice Child	Morrison, Marcy	(636) 896-9050

Please inform your Service Coordinator immediately of changes in address, insurance, income or family members.

Date	Description	Charges	Credits
09/27/2006	Calculated Monthly Fee	\$66.60	\$0.00
09/27/2006	Adjustment for Cost of Service	\$0.00	\$4.10
Subtotal		\$66.60	\$4.10
Current Monthly Fee Due		\$62.50	

This statement includes payments thru 27th of the month.

Aging Information

Current	Over 30	Over 60	Over 90
\$62.50	\$0.00	\$0.00	\$0.00

This is the Calculated Fee payable by the family for services.

This represents the total of all claims paid during the month.

If the Maximum Monthly Fee Amount is less than the Calculated Fee the family is given a credit or adjustment that lowers the amount due by the difference.

This is the total amount due this month.

Any amounts in arrears will be displayed in this area.

Important - Please return this portion with your payment

DO NOT SEND CASH

Please make checks payable to:

Central Finance Office (CFO)

Michael Hall

Account # 123456789

Amount Due \$62.50

Amount Enclosed _____

Send payments only to:

MISSOURI FIRST STEPS
PAYMENT PROCESSING CENTER
PO BOX 29134
SHAWNEE MISSION KS 66201-9134

This stub should be returned with
the payments.

